2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000033834

Entity Name: N.T.P. MANAGEMENT CORP.

FILED Jun 08, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
5515 SE ABSHIER BLVD. BELLEVIEW, FL 34420				5515 SE ABSHIER BLVD. BELLEVIEW, FL 34421	
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
P.O.BOX 2494 BELLEVIEW, FL 34421			5515 SE ABSHIER BLVD. BELLEVIEW, FL 34421		
FEI Number	: 20-0904592	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
PYLES, NA 4742 SE 3 OCALA, F	7TH STREET	3			
	e named entity : e of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both,	
SIGNATU	RE:				
Electronic Signature of Registered Agent			jent	Date	
		3(2)(b), F.S., the corporation did n g Trust Fund Contribution ().	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () PYLES, NATHA P.O.BOX 2494 BELLEVIEW, F		Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NATHAN T PYLES P 06/08/2009